Child and Youth Officer for British Columbia

For immediate release
April 3, 2006

Using Youth and Community Participation to Combat Unacceptable Rates of Aboriginal Youth Suicide

VICTORIA – Jane Morley, Child and Youth Officer for British Columbia has today made public her special report entitled *Sayt K'üülm Goot – Of One Heart: Preventing Aboriginal Youth Suicide Through Youth and Community Engagement.*

The report arises out of a joint initiative with the First Nations Summit, the Union of BC Indian Chiefs, the United Native Nations and the Métis Nation BC, and includes recommendations to the provincial government on how British Columbia can prevent Aboriginal youth suicide by involving Aboriginal communities and youth directly in prevention efforts.

The joint initiative culminated in a three day event in Prince Rupert, including an inter-nation youth forum, attended by Haida, Tsimshian and Nisga'a youth, Elders and community leaders and service providers, and a high-level policy round table, involving youth representatives, Band leaders, provincial First Nations leaders, and provincial and federal government policy decision-makers.

Grand Chief Edward John, a member of the First Nations Summit Political Executive welcomed the publication with these words:

"It is important to support initiatives in our communities and respond quickly when communities seek support where any crisis occurs. This is true with suicide involving our youth. It is a crisis and we must respond. We encourage governments to seriously consider this report and work with First Nations to implement the recommendations. We thank the youth and communities who have come forward to take part, especially those who organized and participated in the Aboriginal Youth Suicide Forum held in Prince Rupert last year."

- more -

In her report, Morley calls on the Premier and the Ministers of Health and Children and Family Development to provide leadership in breaking down barriers, created by federal/provincial jurisdictional issues, that get in the way of effective service delivery to Aboriginal children, youth and families.

Morley's other recommendations include focusing government energy and resources on community developed suicide prevention strategies that recognize the diversity of Aboriginal communities in British Columbia and engage youth in planning and programs.

Morley challenges communities and governments at all levels to honour the youth who participated at the forum by acting on their recommendations, which are featured in the report.

"This project demonstrated that we, in British Columbia, can take the best of the research strategies, and add to them the perspectives of youth and communities to come up with a common-sense approach to serious social issues facing First Nations and urban Aboriginal communities" said Morley.

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SPECIAL REPORT

SAYT K'ÜÜLM GOOT – OF ONE HEART

PREVENTING ABORIGINAL YOUTH SUICIDE THROUGH YOUTH AND COMMUNITY ENGAGEMENT

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Honourable Wally Oppal
Attorney General

As part of my role as Child and Youth Officer for British Columbia and in accordance with the provision of Section 8(3) of the *Office for Children and Youth Act*, I have prepared this special report, entitled *Sayt K'üülm Goot – Of One Heart: Preventing Aboriginal Youth Suicide Through Youth and Community Engagement*.

This report arises out of a joint initiative with the First Nations Summit and other Aboriginal political organizations that are signatories to the 2002 Memorandum of Understanding between those organizations and the provincial government relating to Aboriginal children. It reflects the involvement of youth and communities on which suicide has had a profound and devastating impact.

This report includes recommendations and advice to the provincial government on how British Columbia can help prevent Aboriginal youth suicide by involving Aboriginal communities and youth directly in prevention efforts.

Jane Morley, QC
Child and Youth Officer for British Columbia

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Acknowledgments

I would like to thank the members of the planning committee; the youth, Elders, volunteer counsellors and others who attended the events of May 4, 5 and 6, 2005; the participants of the policy round table; the youth who took part in follow-up conversations; Nolan Innes for his outstanding art work; and all those who made financial and other contributions.

I also want to thank the communities of Prince Rupert, Kitsumkalum, Kitkatla, Lax Kw'alaams, Hartley Bay and Kitselas, and the Nisga'a Nation and the Haida Nation, who participated in the forum. These communities had the courage to confront the issue of youth suicide.

Finally, I would like to acknowledge Larry Guno, who attended the events described in these pages and died soon after. Larry was the respected chair of the North Region Aboriginal planning committee and member of the joint working committee of the chairs and the Ministry of Children and Family Development. Over many years of service, he devoted his skill and energy to the cause of social justice and the aspirations of the Nisga'a and of Aboriginal people in general, and he especially cared about the children and youth.

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A note about terminology

It is understood that Indigenous peoples in Canada represent a broad range of diverse and distinct cultures, each of which are characterized by different languages, customs and traditions, and there is no such thing as a "singular Aboriginal culture." For the purposes of this report, the term *Aboriginal* refers to First Nations ("Status" and "Non-Status Indians"), Métis and Inuit peoples.

Executive Summary

This special report documents the inter-nation forum and policy round table that took place in Prince Rupert in May 2005. These remarkable events grew out of the deep concern about Aboriginal youth suicide expressed by the four Aboriginal political organizations – the First Nations Summit, the Métis Provincial Council of B.C., the Union of B.C. Indian Chiefs, and the United Native Nations – in discussions with the Child and Youth Officer. The report also sets out the Child and Youth Officer's recommendations on preventing Aboriginal youth suicide through youth and community engagement.

What we know

National rates of suicide among Aboriginal youth are estimated to be five to six times higher than among non-Aboriginal youth.

A number of risk factors for suicide among youth in the general population have been identified. The greater the number of risk factors, the higher the risk for suicide. The risk factors are largely the same for Aboriginal youth as they are for non-Aboriginal youth. However, given the historic, social and economic realities for Aboriginal people, Aboriginal youth are likely to experience more of these factors, and experience them more intensely, than non-Aboriginal youth.

The approaches that could make a difference for children and youth at risk have been articulated in several different ways. One that reflects Aboriginal cultural values is the Circle of Courage model. Another comes from a relatively new branch of developmental research that focuses on resilience. A third is the rights-based approach articulated in the United Nations Convention on the Rights of the Child.

All three of these approaches see children and youth in the context of family and community, with particular emphasis placed on community. Community is especially important for Aboriginal people, for whom the community is an extension of family, as well as the holder of culture, of language and values. Not surprisingly, research has shown time and again that the most successful approaches to Aboriginal youth suicide and other mental health issues are those based in communities.

The key considerations for promoting well-being and reducing suicide risk among Aboriginal youth have been identified as including the following:

- Programs should be locally initiated, owned, and accountable, embodying the norms and values of the local First Nations culture.
- Suicide prevention should be the responsibility of the entire community.
- A focus on the behaviour patterns of children and youth up to age 20 is essential.

- The problem of suicide must be addressed from many perspectives, including biological, psychological, socio-cultural, and spiritual.
- Programs that are long-term in focus should be developed alongside crisis response services.
- Evaluation of the impact of prevention efforts is essential.

One of the biggest obstacles to progress in preventing Aboriginal youth suicide and promoting mental health at the community level is the complexity of Canada's constitutional division of powers and responsibility among the federal, provincial and First Nations governments. Inconclusive debates over which government should provide mental health services and programs interfere with the creation of integrated services and programs, in general, and a coordinated, integrated and community-driven approach to Aboriginal youth suicide prevention, in particular.

The Prince Rupert Project

The four Aboriginal political organizations wanted to undertake a project in a community, which would serve as the beginning of a provincial strategy to address Aboriginal youth suicide. They offered to work with the Child and Youth Officer as partners on this issue, engaging youth and communities in concrete and innovative ways.

Prince Rupert was selected for the project because it provided an opportunity to build on community successes in responding to a suicide-related crisis. The planning process began in fall 2004, with the creation of a committee consisting of representatives from Prince Rupert, Lax Kw'alaams, Kitkatla, Hartley Bay, Metlakatla, Kitsumkalum, Haida and Nisga'a Territories; the federal, provincial and municipal governments; the Child and Youth Officer's team; and the First Nations Summit. The process was community driven, with youth participation a key factor.

On May 4, 2005, Aboriginal youth from the Tsimshian, Haida and Nisga'a communities arrived with their chaperones in Prince Rupert, along with community and First Nations leaders, and policy-makers and other representatives from the provincial and federal governments. An internation forum took place on May 5, with more than 150 Aboriginal youth participating in a series of activities which culminated in their sharing their stories, ideas and recommendations with the Elders, community leaders, government representatives and other adults present. The youth said they want:

- opportunities for more involvement in cultural activities
- opportunities to work with Elders and supportive adults; positive liaison with authorities, especially police; and involvement of parents in youth activities
- economic opportunities, including volunteer work opportunities and work experience programs
- more recreational facilities and educational supports

- drug- and alcohol-free communities
- sexual abuse prevention and counselling programs
- development and acceptance of youth leadership, and recognition that youth also have wisdom
- youth-specific budgets and sustained funding.

On May 6, a policy round table brought together policy-makers from federal, provincial, municipal and Aboriginal governments, and youth, Elders, band representatives, police, and community activists to discuss what they had heard from the youth and to make decisions about and commitments to supporting them.

Advice to the provincial government

The Child and Youth Officer's advice to the provincial government is not intended to cover everything that the provincial government can do to prevent Aboriginal youth suicide. It focuses on involving youth and communities in the solutions, and addressing the longstanding jurisdictional and funding barriers to progress. The advice is as follows:

> Honour the youth who participated in the inter-nation forum in Prince Rupert on May 5, 2005 by acting on their recommendations and taking them into account in planning, policy and funding decisions within all relevant ministries and at whatever level is appropriate. When a funding or policy decision reflects the youth's recommendations, acknowledge their participation in decision-making.
>
> In the ministries of Health and Children and Family Development, focus energy and resources on supporting communities in developing local strategies to prevent Aboriginal youth suicide, including sharing of ideas by Aboriginal communities that are not experiencing youth suicide.
>
> Engage, in a meaningful way, Aboriginal communities and youth in the Ministry of Children and Family Development planning process for the provincial child and youth mental health plan, and incorporate in community plans a holistic approach to the delivery of services.
>
> Expect provincially-funded mental health service providers, as part of their job, to develop community-based alliances with mental health workers funded by federal departments, and make community and youth engagement key principles in the work done through these alliances.

Ensure that Aboriginal youth are fully involved in all discussions about suicide prevention policies and programs, and that all programs developed include training, development, compensation and leadership roles for youth.

In planning, policy, funding and practice decisions related to preventing Aboriginal youth suicide and promoting healthy youth and communities, recognize the uniqueness of Aboriginal communities, the diversity of their need, the significance of their gatherings and cultural activities, and for youth, the importance of relationships with adults and connecting with traditional values.

Take leadership at the premier's level, as well as at the level of the ministers of Health and Children and Family Development, in developing and implementing a strategy to break down the barriers created by jurisdictional issues. In particular, pressure the federal government for more flexible funding to support Aboriginal child and family service agencies so that they can fully participate in community-based youth suicide and mental health promotion strategies.

What's in a Name

Sayt k'üülm goot – "of one heart" in the language of the Tsimshian people – has a profoundly important meaning for the First Nations people of the Northwest Coast of British Columbia. An ancient expression that conjures excitement and enthusiasm, *Sayt k'üülm goot* speaks of the area's culture and the importance of carrying the people's ancestral heritage on to their youth. It transcends differences in clans and house systems and brings people to a visionary and spiritual place, where they can rise to new roles and new strengths. *Sayt k'üülm goot* reflects the First Nations view of the world, in which everything is one.

Heart means many things. Physically, the heart is the pump that brings life and energy to the body. A person with "the heart of a lion" is courageous. Someone with "a heart of gold" is generous. A person who has "a good heart" is one who cares for people. The heart of a people is their spirit. And getting to "the heart of the matter" means getting to the core.

The project that gave rise to this report has elements of all these meanings. That is why the project – and the events (an inter-nation forum and policy round table discussion) that took place in Prince Rupert on May 4, 5 and 6, 2005 – came to be called *Sayt K'üülm Goot* – Of One Heart. The name was not chosen lightly by the community planning committee. It was chosen because it speaks of a community heart that beats for the health of its people, and it perfectly describes youth, Elders and other adults gathering to reflect on the healing and rejuvenation of their communities and to encourage youth to make life-enhancing choices.

The concept of *Sayt k'üülm goot* became concrete in the creative work of Nolan Innes, a youth from Kitkatla, whose artwork, a gift to the event, became the image of the conference. It adorned the conference materials and the t-shirts given to all participants, and now can be seen on the cover of this report.[1]

When I saw the theme,* Sayt k'üülm goot, *I said: The youth are reaching out for their culture. To be of one heart is to bind together, to unite.

– Tsimshian Elder

[1] With permission from Nolan Innes.

About This Report

The death of a young person by suicide is tragic no matter where it happens. But it is particularly devastating to the small and close-knit Aboriginal communities of British Columbia. For many Aboriginal communities, youth suicide presents a terrible contradiction: the youth who are the hope of the future are also those most vulnerable to suicide risk.

Many reports have been written about Aboriginal youth suicide. Despite these and the many efforts made to address the issue over the years, the solution still eludes us. But there are things that we can do if we work together, with one heart, to support youth and help them build resilience – the ability to overcome adversity.

Sayt K'üülm Goot – *Of One Heart: Preventing Aboriginal Youth Suicide through Youth and Community Engagement* documents the remarkable events that took place in Prince Rupert on May 4, 5 and 6, 2005. It is also the outcome of my commitment to produce a special report offering advice to government and communities and informing the public about some of the issues facing Aboriginal youth today.

This report is a little different from others on the subject. It is not meant to be the definitive work on preventing Aboriginal youth suicide. It attempts to explore and briefly describe what we know about the important role of youth and communities in Aboriginal youth suicide prevention efforts. Most importantly, this report invites readers to think about what they can do as community members or as policy-makers.

The report is in three parts. The first provides a brief summary of what we know about Aboriginal youth suicide, the risk factors, the approaches that could make a difference, and the obstacles to progress. The second part tells the story of the project that culminated in the inter-nation forum and policy round table that took place in Prince Rupert in May 2005. Finally, the third part includes my reflections on the Prince Rupert project and on what we can do to prevent the tragedy of youth suicide in Aboriginal communities, as well as some specific advice for government.

Suicide is a word that strikes fear and sadness into the hearts of people everywhere. Some people are afraid to talk about suicide, because they think it might trigger a round of suicides in their community. But that fear can act as a barrier to exploring the causes of suicide, and to seeking solutions that will help people – especially young people – choose life. (Nishnawbe-Aski Nation, 2003)

As the Child and Youth Officer for British Columbia, I am mandated to independently observe government-funded services for children and youth and to advise government on how to improve those services. I have statutory authority to comment publicly on matters affecting children and youth. My mandate focuses on systemic change.

Peter's Story

Nisga'a Hall in Prince Rupert is crowded at the beginning of the inter-nation forum – filled with the 150 young people who have come from all the participating communities, and at least that many Aboriginal leaders, policy makers, support people and media.

A young man begins to speak quietly into the microphone. The noise and movement in the room end abruptly.

"I am your brother; I am your son; I am your uncle; I am your father," he says.

In other words, we are all one family, we are all "of one heart."

This is Peter. He is from the Nisga'a Nation and at 27 has lived most of his life in the Nass Valley of northern British Columbia.

Peter's earliest memories reach back to when he was just two years old. His parents were drinking then, and the drinking remained a constant throughout most of his childhood and adolescence.

When Peter was seven, he was left in charge of his three younger siblings when his mother went away to search for his father. His youngest brother was only a few weeks old at the time, and Peter did not know how to change his diaper or prepare his formula. His mother had simply told him that if he were happy, the baby would be happy too. After several days, the landlord brought in a social worker and the children were put into foster care.

"Those few days at the foster home I really enjoyed because I could just play," Peter says.

When Peter's parents came back, the children returned home and the family relocated to the community. His parents continued to leave for days at a time, and sometimes the children were left with babysitters who often abandoned the children too, leaving Peter in charge of the other children.

The years passed, and alcohol remained a strong presence. When Peter was about 20, he felt lost. He had nowhere to go and nothing to do. His parents had separated and he no longer had a caregiver role to play. Memories began to haunt him, memories of childhood abuse and molestation by a babysitter. Anger was becoming a part of him that he could no longer ignore: he was angry with his parents and siblings for their drinking. At the same time, he felt very sad.

Peter walked across the same bridge every day to go to work.

"One day I stood on the bridge wanting to jump," he says, "and someone honked and waved at me and pulled me back. I had thoughts of wanting to be run over, and then another person would wave at me from their vehicle."

Peter left the village with a dance group, in what was to be the most important trip of his young life. It was on this trip that he met his future wife.

"The first time she held my hand, I started to cry," Peter says. "Since that time I've had a great flow of childhood memories that are very painful....It seemed like no one cared except for my girlfriend. But for the first time I could cry a real cry and laugh a real laugh. Until finding love in my girlfriend and her family, I had been numb."

Then tragedy struck.

"My brother committed suicide two days after his 20th birthday," Peter says. "It wasn't until I saw his body and the rope burns around his neck that I accepted that he was dead. He had started drinking when he was 16, and I was very angry with him for choosing to drink. I thought my parents had encouraged him to drink by allowing him to drink with them. I had spoken to him, expressing my disappointment in him and he said he wouldn't drink again. He wanted my parents to be there at his soccer games but they never did go to watch

him. My parents were numb at the funeral, and I was crying and felt a great deal of pain."

Peter's uncle advised him to go to a treatment centre. Peter went to a counsellor and began to talk about his memories. The counsellor helped bring out a side of Peter that was not so angry. Eventually Peter went to a treatment centre. This was difficult, because he didn't use drugs or alcohol.

"It was then that I realized I was exactly like my relatives, but without using drugs or alcohol," Peter explains. "I learned to take care of myself and let go of the need to take care of my parents and siblings." He began to see his family as individuals living together, and to realize that his parents raised him the way they themselves had been raised. "I couldn't be mad at my parents anymore. I had to come around to accept them as they are."

Peter now visits his parents with his children. "My children bring out the better side of them," he says. And he is finding that his new relationship with his parents is making a difference. "I see my dad needs family right now and he needs to feel loved. I spend time with him and he'll say to me: 'I really like it that you're spending time with me.' He's started to talk about my brother and he's slowly opening up. My mother wants to meet regularly with the family, and she is more involved with us right now, especially the grandchildren."

Today Peter works as a language teacher in the community and lives with his wife and children there. He is working toward a Bachelor's degree.

Peter stops talking. The silence in the room is shattered suddenly by applause. Everyone rises. Many are weeping.

Louisa Smith, an Elder, makes her way to the front of the room, accompanied by three Nisga'a and Tsimshian leaders, Nelson Leeson, Larry Guno and Murray Smith. Louisa holds Peter for a long time.

As Peter returns to his seat, accompanied by Louisa and the leaders, the others in the room turn toward Peter and begin to wave.

Out of the darkness in our communities, we are seeing light. The youth are showing us light.

– Louisa Smith, Elder

The numbers

National rates of suicide among Aboriginal youth are estimated to be five to six times higher than among non-Aboriginal youth (Health Canada, 2003). More specifically, from 1989 to 1993, the rate of suicide among Aboriginal males aged 15–24 was 126 per 100,000, compared to a rate of 24 per 100,000 for non-Aboriginal males of the same age in Canada. For Aboriginal females, the rate of suicide among those aged 15–24 was 35 per 100,000, compared to 5 per 100,000 among non-Aboriginal females (CICH, 2000).

Many Aboriginal leaders also see the continuing high rate of death due to accidental injury, such as motor vehicle accidents, poisonings, accidental falls and other injuries, as resulting from the same root causes as suicide. The rate of these accidental deaths averages three to four times higher than for the general population (Provincial Health Officer, 2002). The Royal Commission on Aboriginal Peoples estimated that as many as 25 per cent of these accidental deaths may be unreported suicides (RCAP, 1995).

However, while overall rates of suicide among Aboriginal youth appear to be higher than those for non-Aboriginal youth, it is important to acknowledge that variations in suicide rates across First Nations communities are common, and many have very low to non-existent rates of youth suicide. This raises important questions about the contributing factors that could explain these variations (Chandler & Lalonde, 1998).

Risk factors

A number of risk factors for suicide among youth in the general population have been identified in the research.[2] They can be long-standing conditions, such as child sexual abuse or a family history of suicide, or they can have a more sudden onset, as in the break-up of a relationship or conflict with the law. The greater the number of risk factors, the higher the risk for suicide.

The risk factors for suicide are largely the same for Aboriginal youth as they are for non-Aboriginal youth. However, given the historic, social and economic realities for Aboriginal people, Aboriginal youth are likely to experience more of these factors, and experience them more intensely, than non-Aboriginal youth. Table 1 summarizes the most well-established risk factors among Aboriginal youth.

Table 1: Risk factors for Aboriginal youth suicide

Level	Risk Factor
Social/Cultural/Political	■ History of colonization and cultural disruption ■ Racism ■ Forced assimilation ■ Poverty ■ Unemployment
School/Community	■ School problems ■ Social isolation ■ Exposure to other suicides ■ Access to suicide methods (e.g., pills, guns)
Individual/Family	■ Male gender ■ History of suicidal behaviour ■ Family history of suicide ■ History of abuse/neglect ■ Early childhood loss and separation ■ Depression ■ Substance abuse ■ Certain personality traits (e.g., impulsivity, hypersensitivity, aggression) ■ Current life stressors (e.g., relationship break-up, conflict with the law)

[2] As part of the planning process for the inter-nation forum and policy round table in Prince Rupert, Dr. Jennifer White (University of Victoria) prepared a literature review on reports and research related to Aboriginal youth suicide. Kelly MacDonald (then Deputy Child and Youth Officer, Aboriginal Services) contributed a section on jurisdictional issues, which are a major factor in considering policy responses. Table 1: Risk factors for Aboriginal youth suicide is adapted from the literature review. Sources for the table are Chandler & Lalonde (1998), Health Canada (2003), Kirmayer et al. (1999), and White & Jodoin (1998).

Historic, social and economic realities

Historical attempts by the Canadian government to absorb and assimilate Aboriginal people into the national mainstream are well known. The most high-profile of the attempts at assimilation was the residential schools. At these schools, the children were not allowed to speak their language or practise their traditions. Elders no longer were available to pass on the culture to younger generations. Parents were not available to pass on parenting skills. Many children experienced physical, emotional and sexual abuse.

Aboriginal people who attended residential schools, their children and their children's children continue to experience the legacy of residential schools. Their communities must deal with issues such as physical and sexual abuse, family violence and substance abuse.

As residential schools began to close down in the 1950s, the number of Aboriginal children taken into the care of the state increased significantly. Many of these children ended up in non-Aboriginal homes, some out of the country and on other continents. Today, despite attempts to address the disproportionate number of Aboriginal children in care, they currently account for almost 50 per cent of the children and youth in government care in British Columbia.

These and other measures have had overwhelming impacts on the Aboriginal identity, including loss of language and heritage, and the breakdown of the family and community ties that are so important to Aboriginal cultures. The erosion of heritage has led to self-estrangement and loss of self-esteem among young people. Straddling two cultures (Aboriginal and European) has been found in a New Zealand study to be an additional stressor for youth (Minore & Hopkins, 2003).

In 2001, the annual report of British Columbia's Provincial Health Officer focused on the health and well-being of Aboriginal people in the province. The report clearly demonstrated that British Columbia's Aboriginal people experience more social and economic disadvantages than their non-Aboriginal counterparts: their level of employment, income and educational attainment is about 80 per cent of those of other British Columbians.

What makes a difference?

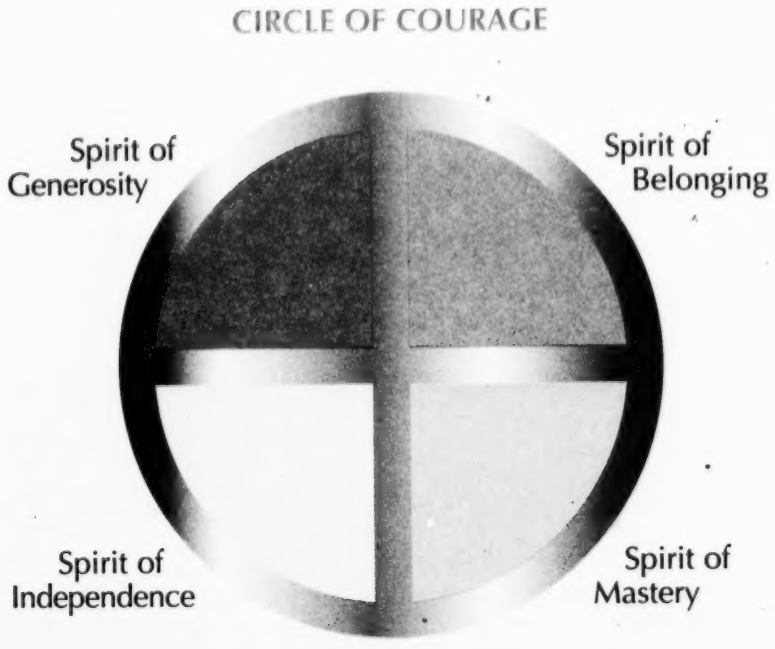
The approaches that could make a difference for children and youth at risk have been articulated in several different ways. One that reflects Aboriginal cultural values is the Circle of Courage model. Another comes from a relatively new branch of developmental research that focuses on resilience. A third is the rights-based approach articulated in the United Nations Convention on the Rights of the Child. All three of these approaches see children and youth in the context of family and community.

The Circle of Courage

Grounded in traditional Native American culture and childrearing philosophies, the Circle of Courage (Brokenleg, Brendtro, & Van Bockem, 2001) comprises four inter-related components of an approach to reclaiming children and youth at risk:

- Spirit of belonging – Children develop a sense of belonging through caring relationships with people in their families, schools, neighbourhoods and communities.
- Spirit of mastery – Children need adults in their lives who have high expectations of them and provide them with opportunities to experience success, develop skills, learn from the wisdom of their Elders, and perform service for others.
- Spirit of independence – In striving for control over their own lives, children need to be heard and respected and to participate in decision-making.
- Spirit of generosity – Children benefit from opportunities to help others and contribute to their communities.

When this approach is embraced by a community, children and youth have a sense of their own worth and can project a bright future for themselves.



Resilience

The approach embodied in the Circle of Courage reflects the findings of international studies of resilience – the ability to overcome adversity and achieve good developmental outcomes. In striving to understand how some children are able to overcome adversity and become healthy and productive adults, researchers have identified factors associated with resilience that are common throughout the world. These protective factors bolster development for all children; for children exposed to chronic risk, they act as buffers, allowing them to achieve levels of competence and psychological well-being that they might not otherwise have been able to achieve.

Protective factors include:

- caring relationships with supportive caregivers and well-adjusted adults
- opportunities to participate in and contribute to their communities, and
- high expectations of their behaviour and achievements.

The UN Convention on the Rights of the Child

The principles underlying the rights and vision of the UN Convention on the Rights of the Child are consistent with the research on resilience. The Convention affirms children's fundamental human rights in four important areas:

- Development – Children are entitled to grow to adulthood in a nurturing family and community, with an adequate standard of living to support their full development.
- Protection and survival – Children have the right to life and the right to be protected from all abuse, violence, exploitation and neglect.
- Participation – Children are fully persons with the right to express their views and participate in decision-making concerning them.
- Non-discrimination – All children are entitled to respect and protection and benefit of their fundamental human rights regardless of their race, ethnic origin, colour, religion, sex, age, disability or other characteristics.

The vision of the Convention is that families and communities are the natural environment for the development and well-being of children; parents have primary responsibility for nurturing children; and the role of governments and communities is to support children and their families.

The importance of community

The Circle of Courage, resilience research and the UN Convention on the Rights of the Child all place a great deal of emphasis on community. Community supports children and their families, and is the source of caring relationships and of a sense of belonging. Children who grow up in safe, healthy communities are more likely to overcome difficulties and adversity to become healthy and productive adults. Resilience begins not just in family, but in community.

Community is especially important for Aboriginal people, for whom the community is an extension of family. In addition, community is the holder of culture, of language and values; in order for the culture to survive, the community must thrive.

It's not surprising, then, that research has shown time and again that the most successful approaches to Aboriginal youth suicide and other mental health issues are those based in communities. For example, the Royal Commission on Aboriginal Peoples pointed out that communities, where people live their lives, are where suicide prevention is best approached. The Health Canada report, *Acting on What We Know*, described a range of strategies to reduce Aboriginal youth suicide risk, all based on a set of guiding principles that involve engaging community members, ensuring cultural continuity, and building community capacity.

The feast: Community promoting youth resilience

For the Aboriginal people of the Northwest, the feast (or potlatch) provides a means of sharing resources that supports individuals, young and old, and community learning and incorporates decision-making by consensus. It also supports the intertwining relationships that weave a strong social fabric.

The feast gives each member of a society a sense of his or her place and belonging in the society. Everyone – including the young – knows their role in the feast and what is expected of them within that role. In communities where the feast tradition is strong, young people's important role in the community is acknowledged, and they are given the opportunity to actively contribute to family and community life.

Strategies for promoting well-being and reducing risk

Several Canadian reports on the issue of suicide prevention among Aboriginal youth have recently been published. While there are subtle variations in the content and focus of these reports, there is a clear consensus that this is an urgent issue that requires immediate action.

For the most part, youth suicide prevention efforts that focus specifically on Aboriginal youth have not been well documented or systematically evaluated. (There are some exceptions. One is the Zuni Life Skills program – a school-based, culturally sensitive, life skills–focused suicide prevention program in an American Indian reservation in New Mexico [LaFromboise & Howard-Pitney, 1995] – a modified version of which is being used in Prince Rupert. Another is a community gatekeeper training program that was implemented in an Aboriginal community in the Shoalhaven region of New South Wales, Australia [Hays, Hays, DeVille, & Mulhall, 2000].)

Although there is an overall lack of formal research evidence, researchers, Aboriginal leaders and government-sponsored bodies are generally in agreement about the principles that should guide the way prevention

programs for children and youth are conceived and delivered in Aboriginal communities.

The key considerations for promoting well-being and reducing suicide risk among Aboriginal youth are well summarized in the Health Canada (2003) report, *Acting on What We Know*:

- Programs should be locally initiated, owned and accountable, embodying the norms and values of the local First Nations culture.
- Suicide prevention should be the responsibility of the entire community.
- A focus on the behaviour patterns of children and youth up to age 20 is essential.
- The problem of suicide must be addressed from many perspectives, including biological, psychological, socio-cultural and spiritual.
- Programs that are long-term in focus should be developed alongside crisis response services.
- Evaluation of the impact of prevention efforts is essential.

In addition, in *Aboriginal youth: A manual of promising suicide prevention strategies*, researchers Jennifer White and Nadine Jodoin (2004) have described several promising youth suicide prevention programs in Aboriginal communities across Canada and identified practical steps for communities that want to take action to reduce youth suicide risk. These steps include:

- identifying community assets (i.e., current strengths and capacities)
- recruiting community members who can offer a range of expertise
- gathering information (e.g., suicide statistics, perceived needs, services available, etc.)
- establishing a planning and coordinating body at the community level
- developing a community action plan, and
- evaluating the process and the results.

Community suicide prevention planning groups can include, in addition to mental health and social service workers, youth, parents, Elders, school representatives, band and tribal administrators, police/RCMP, traditional healers, addictions workers, nurses and individuals who have lost family members to suicide.

Studies of non-Aboriginal community suicide prevention coalitions suggest that the most important ingredients for success include maintaining a clear focus on tasks, developing the skills of coalition members, developing links with other initiatives and organizations, supporting broad-based and multiple-sector involvement, and becoming increasingly collaborative over time (Florin, Mitchell, Stevenson, & Klein, 2000; Hays, 2000).

Those Aboriginal communities in British Columbia that have not experienced a youth suicide in recent years may have useful information to share with other communities.

Obstacles to progress: Jurisdictional and funding issues

The complexity of Canada's constitutional and administrative division of powers and responsibilities among the federal, provincial and First Nations governments creates a challenge for community-level strategies for preventing Aboriginal youth suicide. Report after report on the subjects of Aboriginal youth suicide and mental health mention the federal and provincial division of responsibilities and the funding arrangements flowing from that jurisdictional division as a barrier to well-integrated services. And report after report also state that little or no progress has been made in removing this barrier.

Inconclusive debates over which government should provide mental health services and programs interfere with the creation of integrated services and programs, in general, and a coordinated, integrated and community-driven approach to Aboriginal youth suicide prevention, in particular. Clients and community agencies are left confused about who is responsible for any program or service.

With respect to funding for community-based programs, navigating the requirements to receive and retain that funding from various bureaucratic pools requires expertise that is lacking in many small communities. Also, the criteria for accessing program funding are established without taking into account the diverse cultures and complex nature of British Columbia's Aboriginal communities, and are therefore often not attuned to the particular needs of these communities. The often short-term nature of government funding makes long-term planning and sustainability of community-based programs difficult.

First Nations in remote locations have difficulty accessing child and youth mental health services provided in urban centres. These communities are particularly vulnerable to jurisdictional disputes about who is responsible for transporting patients to medical facilities in urban centres, or for diagnostic and other services provided by the province (FNCFCS, 2005).

Constitutional and administrative division of responsibility for mental health services

Under the Canadian Constitution the provinces are generally responsible for health. They receive transfer payments from the federal government to provide health services, including mental health services. In British Columbia, mental health services are provided for adults through the Ministry of Health and for children and youth through both the Ministry of Health (hospital-based services) and the Ministry of Children and Family Development (community-based services).

Constitutionally, the federal government has responsibility for First Nations people living on reserves. In the area of health services, this responsibility is fulfilled in part by transfer agreements that many First Nations have signed with Health Canada. These transfer agreements transfer control over health services from the federal government to their communities.

The federal government also provides direct health care services and programs for First Nations people on reserve through the First Nations and Inuit Health Branch (FNIHB) of Health Canada. There is no comprehensive response to mental health issues at the federal level. FNIHB, however, does provide funding for mental health services in various ways, including through one or more of its four core programs (Brighter Futures, Building Healthier Communities, National Native Alcohol and Drug Abuse Program, and Non-insured Benefits Program).

Planning for child and youth mental health services in British Columbia

In February 2003, the government of British Columbia released a five-year plan to improve the capacity and quality of mental health programs and services for all children and youth in the province. Recognizing that existing programs were not serving Aboriginal children and youth well, the government pledged support for Aboriginal communities having access to the full range of services that make up the formal provincial child and youth mental health system, and for Aboriginal leadership and the involvement of individual Aboriginal communities in developing their own capacity to improve mental health outcomes for their children and youth. This has translated into staffing and infrastructure support for Aboriginal planning committees, as well as funding for the development of new mental health services that will be delivered by Aboriginal agencies. In addition, the government recently established a provincial Aboriginal Child and Youth Mental Health Services Planning Committee to (among other things) promote and guide the planning and development of regional Aboriginal mental health services and facilitate the development of regional Aboriginal child and youth mental health plans.

Many Aboriginal communities have encountered barriers to engaging with the province's mental health planning process. Aboriginal communities

generally favour less individualistic, more integrated and holistic service delivery models – a different framework from that of the existing mental health system and what was being proposed in the mental health plan. While work has begun on bringing Aboriginal perspectives into the planning, restructuring and development of child and youth mental health services in the regions, there are still significant challenges.

One of these challenges is inadequate information-sharing between the federal and provincial governments, and between First Nations and both levels of government. Another is the lack of involvement of Aboriginal youth in developing and implementing mental health plans.

The role of Aboriginal child and family services agencies

The provincial child and youth mental health plan is administered by the Ministry of Children and Family Development (to the extent that the plan relates to children and youth under 19), which also has responsibility for child protection and family development services for Aboriginal children, youth and families living in or away from their communities. Increasingly this responsibility is delegated to Aboriginal child and family service agencies, which are also the agencies often best-placed to promote mental health at the community level, in conjunction with public health service providers. Funding issues in the child welfare area are therefore relevant to funding programs seeking to prevent Aboriginal youth suicide and to promote mental health.

A 2005 report, *Wen:de: We Are Coming to the Light of Day* (FNCFCS, 2005), undertaken on behalf of the First Nations Child and Family Caring Society of Canada, describes the long-standing funding issues between the federal government and the First Nations delegated child welfare agencies. The federal government's funding formula, known as Directive 20-1, funds agencies for the number of children that they have in care; however, Directive 20-1 does not cover preventive and health promotion services for children outside of care. In order to receive funding to allow children and youth living on reserve to access these services, delegated agencies must bring these children and youth into care.

At times, this situation has caused conflict between the delegated agencies and the province, as the agency may not receive sufficient funding to provide provincially mandated services for families and out-of-care options. The financial health of these Aboriginal family and child service agencies is crucial, because the agencies are community-based and are therefore important community partners in pursuing mental health promotion and suicide prevention strategies. Recently there have been some indications that Indian and Northern Affairs Canada is finally moving away from the inflexibility of its funding formula approach in some circumstances. This would certainly be progress, but much more remains to be done before we have funding formulae driven by what makes sense for children, youth, families and communities.

THE PRINCE RUPERT PROJECT: BEFORE, DURING AND AFTER

How it began

Suicide in our communities needs to be brought out and not be a secret anymore. We need to speak of the suffering and the struggling in our communities. We need to keep holding each other up.

– Shawn Atleo, B.C. Assembly of First Nations

Early in my tenure as Child and Youth Officer for British Columbia, I had discussions with the leaders of the four Aboriginal political organizations – the First Nations Summit, the Métis Provincial Council of B.C., the Union of B.C. Indian Chiefs, and the United Native Nations. They expressed deep concern about the issue of Aboriginal youth suicide in communities throughout the province, and the loss of hope and the inter-generational impacts of residential schools that they saw reflected in these suicides.

It is easy to be passive. We were afraid. It takes courage to deal with an issue, and in dealing with it, it gives us courage.

– Lyle Argue, Health Director, Kitkatla

The Aboriginal political leaders were interested in looking to communities for answers. Specifically, they wanted to undertake a project in a community, which would serve as the beginning of a provincial strategy to address Aboriginal youth suicide. They were also offering to work with me and my team as partners on this issue, engaging youth and communities in concrete and innovative ways. It was agreed that the First Nations Summit would take the lead for the four Aboriginal political organizations.

In the late summer of 2004, at the suggestion of the Ministry of Children and Family Development's North Region, we began to consider Prince Rupert as a possible site for an Aboriginal youth suicide project. Choosing Prince Rupert would provide an opportunity to build on community successes.

In the previous year, the municipality of Prince Rupert, the Aboriginal and non-Aboriginal communities, and Ministry of Children and Family Development staff had come together to respond to a suicide-related crisis. Their initiatives included extending the hours of Friendship

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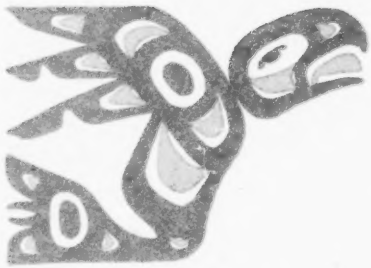
– Lyle Angus, Health Director, Kitkatla

House and providing free public swimming pool access, so that youth would have a place to gather and get support from adults. Meetings continued after the immediate crisis, which led not only to further initiatives, such as the development of a suicide intervention protocol and the introduction of a life skills program in elementary schools, but also to the building and sustaining of trusting community relationships.

Accompanied by a First Nations Summit policy analyst and an associate from my team, I travelled to the region in October 2004. We met with community leaders, the executive director of the Northwest Inter-Nation Child and Family Services, and health directors and social workers from the outlying communities of Lax Kw'alaams, Kitkatla, Hartley Bay, Metlakatla and Kitsumkalum. We also travelled to the Nass Valley to meet with the social policy director of the Nisga'a Lisims Government and the director of the Nisga'a Child and Family Services.



While there was some initial enthusiasm about a possible project, there was also a great deal of suspicion and many questions: How would this project be any different? What good would it do? Won't you be just another outside agency that drops in and drops out, and then leaves us to clean up after you? The questions persisted, and they were difficult, if not impossible, to answer. They were born of past experience and reflected fears that could not be easily allayed.

Yet after these discussions, it was clear that the community's efforts to develop and implement a suicide prevention plan, which had already made so much progress, could use some additional support in obtaining youth participation and more community involvement from the communities of Lax Kw'alaams, Kitkatla, Hartley Bay, Kitselas, Metlakatla and Kitsumkalum, the Métis, the Nisga'a Nation and the Haida Nation.

We promised nothing, except to work hard with youth and communities, so that together we might learn the best ways to support the youth. In the end, community members took the courageous step of agreeing to work with us.

We agreed to serve as a catalyst for the project and to help coordinate the communities efforts in the project. I also agreed to produce a special report that would offer advice to government and communities, while at the same time informing the public about some of the issues facing Aboriginal youth today.

Having determined that Prince Rupert would work as a place to undertake the project, the First Nations Summit held a meeting with chiefs from the communities surrounding Prince Rupert and the Aboriginal provincial leadership to introduce the project to them.

Snapshot 1: Prince Rupert and the surrounding communities

Prince Rupert is located on the northern coast of British Columbia, near the mouth of the Skeena River, 700 km west of Prince George, 1,500 km north of Vancouver, and only 65 km south of the Alaska panhandle. It is one of the largest cities in northwestern B.C., with a population of 15,000, of which a high proportion are Aboriginal. In the Prince Rupert school system, 55 per cent of students identify themselves as First Nations.

Like many northern communities in B.C., Prince Rupert has experienced years of high unemployment and underemployment, resulting in part from longstanding problems in the fishing and forestry industries. The city lost 12 per cent of its population between 1996 and 2001, with people leaving to find work in the cities to the south. However, with recent developments in the tourism, mining and transport industries, Prince Rupert and the surrounding area are beginning to recover.

Located on traditional Tsimshian territory, Prince Rupert provides services for several Tsimshian communities, most of which are accessible only by air or water. It also serves as a centre for the Haida people from Haida Gwaii (the Queen Charlotte Islands) and Nisga'a people from the Nisga'a Territory. Many people from these communities have also settled in Prince Rupert.

The participating communities

Tsimshian communities:

- Hartley Bay – A community of 185 people 120 km south of Prince Rupert, accessible only by boat or float-plane
- Kitkatla – A community of about 500 people on Dolphin Island, 60 km southwest of Prince Rupert, with access only by boat or float-plane
- Kitselas – A community of about 100 people located near Terrace
- Kitsumkalum – A community of more than 270 people, located near the mouth of the Kitsumkalum River, which enters the Skeena near Terrace
- Lax Kw'alaams – One of the largest coastal First Nations communities, with a population of 1,200
- Metlakatla – A community of about 120 people on Prince Rupert harbour

Nisga'a

About half of the 6,000 Nisga'a people live on Nisga'a Territory, in the Nass River valley, north of Terrace; many Nisga'a people have settled in Prince Rupert.

Haida

About 1,400 Haida live on Haida Gwaii (the Queen Charlotte Islands), across Hecate Strait (approximately 100 km) from Prince Rupert, off the north coast of British Columbia.

Snapshot 2: Kim's Story – Leaving home to go to school

Kim[3] is from the Tsimshian First Nation. She lives in a small village more than two hours away from Prince Rupert by boat. At 16, she is finishing Grade 10 at the local elementary–high school. But the school only goes to Grade 10; next year, she and her classmates will have to move to Prince Rupert and board with other families (who may not be related or even Aboriginal) for the last two years of high school.

All in all, it's a pretty scary prospect.

"I'm scared, but a bit excited, too," Kim says. "My parents are really worried." Last year her brother, David, made the same move, but he and his friends were so homesick that they quit school and moved back to the village.

For youth from small, remote communities like this one, Prince Rupert is a big city. It has more than one high school, so friends who have always attended the same small school, where everyone knows everyone, may be split between schools. And there will be lots of kids from other nations, and non-native kids, too. Kim wonders if she'll fit in; she worries about bullying and racism. "I'm pretty tough, but I don't want anyone to bully me," she says. "I don't want trouble."

David told Kim that it was hard to make friends in Prince Rupert. "All they did was hang out – at the mall, or the arcade, or Ziggy's, Java's, or the civic centre." Someone has told Kim she should go to Friendship House in Prince Rupert. David didn't know about it. "Maybe he wouldn't have been so lonely if he had known," Kim says. "They should tell everyone who goes there from here."

David also said the classes were hard. "Our school teaches at a lower level than they do in Prince Rupert," Kim says. "David felt like he was always behind and he would never catch up."

And there are other concerns. Finances are tight, so there won't be many long-distance calls home. Kim hopes she'll catch rides to the village, though: "I will have to come home as often as I can to make sure my parents are OK," she says. Youth who board in Prince Rupert get an allowance of $75 a month, which has to cover everything. Kim hopes the family she boards with will give her lunch to take to school, rather than expecting her to buy it in the school cafeteria, which is what David had to do. She also thinks she will miss the special foods of her culture.

But for Aboriginal youth like Kim and David, who have to move away from home to go to school, there is more than just the normal anxiety about what life will be like in a big new place. They have grown up with the terrible stories about residential school. Kim's parents didn't attend residential school but her grandparents did, and it has had a huge impact on their family.

"My grandma doesn't like to talk about it," Kim says. "She was taken away by the cops when she was six years old, and she never came back to the village until she was 16. They weren't allowed to speak their language, and they had to wear uniforms." Parents couldn't visit with their children very often, because travel was difficult, and they had to get permission from the Indian agent to leave the reserve. "That's why my grandma hardly knew her mom and dad, and my mom said that she never learned to be a really good mom to her either."

Still, putting her worries aside for the moment, Kim hopes that the two years in Prince Rupert will be worth it, because she will get a good education: "And maybe it will be cool!"

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[3] This story is based on a conversation with youth from coast communities near Prince Rupert. Kim and David are not real, but are based on the experiences of several youth from these communities who have to finish high school in Prince Rupert.

Getting there: Challenges and successes

A planning committee for the project was established in fall 2004. Each community was asked to select a representative to form a working group. The working group was made up of the health directors from Lax Kw'alaams, Kitkatla and Hartley Bay; community workers from Metlakatla, Kitsumkalum and Nisga'a Territories; community leaders from Prince Rupert; representatives from federal, provincial and municipal governments; and representatives from my team and the First Nations Summit.

The first monthly planning meeting took place in December 2004. The committee agreed that:

- the planning process would be community driven
- youth participation would be a driving factor, and
- the committee would plan a youth forum and policy round table to take place on May 4, 5 and 6, 2005.

The lead time was short in order to accommodate seasonal cultural activities. In addition, it allowed us to capture the momentum of the planning committee. However, it also meant that funding had to be found quickly.

There were other challenges. The geographical isolation of the participating communities made meetings difficult and expensive. Cultural misunderstandings, both between Aboriginal and non-Aboriginal members and between community activists and bureaucrats, sometimes caused problems. And the underlying fear of the issue itself required that it be addressed cautiously, in order to ensure that communities and youth would get involved.

Planning meetings were well attended and membership of the committee grew, with more people coming to meetings than expected. This gave the process strength and helped build relationships among Aboriginal and non-Aboriginal service providers in Prince Rupert and the other participating communities. It also presented new challenges, as new members always had to be brought up to date, which meant discussing issues several times; written minutes weren't enough.

The planning group was criticized for not including mental health workers and counsellors in the process. Managers were invited at the outset, with the expectation that they would assign appropriate staff, but miscommunication resulted in frontline workers not becoming involved until close to the end of the process. Once involved, however, the frontline workers supported the process.

Fewer youth participated consistently in the planning process than we had hoped, possibly because of the timing of meetings, the travel distances, or economic hardship. In order to get input from youth, the

planning group decided to hire a consultant to visit the communities and work with the youth and others there. Hiring the consultant turned out to be a challenge in itself. Government contracts specify that research compiled by a consultant becomes the property of government, and the communities wanted to retain ownership of the information themselves. (This issue was resolved by transferring the contracts to the First Nations Summit and adding a clause clarifying that the research was owned by the community and could only be used for the purpose of the project. The contractor retained no rights to the research and its ensuing report.)

The visits by the consultant (who is from the Tsimshian Nation) also became a source of some dispute. Government mental health workers worried that sending someone into communities to talk to community members about suicide could intensify the issues and trigger suicidal thoughts in some of the youth. Others felt that it was the adults, not the youth, who feared talking about suicide. In the end, supports and communication links to mental health workers were put in place should anyone express suicidal thoughts or appear to be at risk. (Two communities chose not to participate in the visits, because they felt they did not have the necessary supports available.)

Funding also continued to be a challenge for the planning group until the Ministry of Children and Family Development and the Ministry of Health Services provided substantial funds. In addition, the former Ministry of Community, Aboriginal and Women's Services provided a contract for the facilitator of the event and the federal Department of Health's First Nations and Inuit Health Branch provided breakfast at the inter-nation forum. Local businesses provided additional funding and other contributions. In the end, there was enough funding to support the youth, chaperones and support people coming from isolated communities (see Appendix: Contributors). Some communities sponsored additional youth. Each community chose its youth participants and worked with them ahead of time to prepare them for the event.

We had been to other planning groups, and we knew soon after that they were not for us. But this one – we had a feeling it was going somewhere and it was worthwhile being involved because we were listened to.

– Community member at evaluation meeting, June 2005

The event: May 4, 5 and 6, 2005

May 4: Gathering

Youth from the Tsimshian, Haida and Nisga'a communities arrived with their chaperones in Prince Rupert on May 4. Community and First Nations leaders, as well as policy-makers and other representatives from the provincial and federal governments, were also arriving.

A hospitality suite at the hotel where many of the youth were registered, staffed by two youth participation coordinators from my team, was open the first night and the evening of the inter-nation forum. Groups of youth gathered there to play cards, snack and debrief.

On the first evening, youth from the Prince Rupert Friendship House hosted a pizza dinner and dance for all of the youth participants. The hall was overflowing with young people, and they and the sounds of their music, talking and laughter spilled out into the streets.

The policy round table participants also met over dinner that evening. First Nations Grand Chief Edward John and I welcomed them to the event and encouraged them to listen to the youth and remain open to their ideas.

The consultant selected by the planning committee gave a presentation about the community visits. She commented that in Aboriginal communities suicide creates a pervasive sense of grief and loss. She noted that Elders were beginning to talk about suicide, but that youth were also interested in talking about it. During the visits, young people had:

- expressed concerns about such issues as sexual abuse, alcoholism and neglect in their communities
- said they wanted to get to know their cultures better, and
- expressed interest in working with their Elders and in having opportunities to travel to meet young people in other communities.

Youth participants representing Tsimshian, Haida and Nisga'a youth spoke about the attractions of drugs and alcohol in their communities. They said that these things were so "normal" that often little emphasis was placed on counteracting them, even though the number of children and youth involved was alarming. They said that youth are not challenged at school because it lacks interest for them, and, as a result, their educational results lag behind those of non-Aboriginal youth. They urged the Aboriginal adults in the room to teach them about traditional cultural activities, like weaving and hunting and fishing. They also talked about some non-traditional programs, such as an RCMP-sponsored sea cadet program, which, while unfortunately short-lived, had worked for them.

In response to the words of a youth representative, one chief and father gave a moving description of his own experience, which included many suicides within his own family: "I'll never know why my son, 17 years old, took his own life. We loved him. We can't understand why." He emphasized the difficulty of getting people to address the topic: "How do we get people to start speaking out, start doing things?" He described how he had led his band to participate in economic renewal, because he felt that this was the only way to meet the needs of the community and to give youth some hope. It had allowed the band to adopt cultural programs for the school, build a new swimming pool, and renovate the athletic centre.

Other Aboriginal leaders responded by describing their own experiences with suicide, which led to a discussion about the degree to which suicide, substance abuse and other social problems have become accepted as "normal" because they are so prevalent. Many pointed out that economic issues are linked to social health and well-being.

It was clear from the tone of the gatherings on the first evening that youth would be the focus of the discussions, and that everyone else would be listening intently to their voices.

You honour us with your presence here today. This is your opportunity to enlighten us...to educate us.

– Chief Stewart Phillip, President, Union of B.C. Indian Chiefs, to the gathered youth

The inter-nation forum was attended by more than 150 Aboriginal youth, as well as chaperones, counsellors and support people; federal, provincial and local government representatives; and Elders and leaders from Aboriginal and non-Aboriginal organizations and communities. A number of counsellors from the community had also volunteered to attend the forum and be available to anyone who needed support.

The day began with welcoming addresses. Local and provincial Aboriginal leaders and I expressed our intention to listen closely to the youth and to open ourselves to learning.

In the keynote address, a Nisga'a youth described his struggles with suicide issues after a childhood fraught with emotional upheavals, neglect and removals from his home (see Peter's Story, page viii). What stopped him from acting on those thoughts was the small, simple acts of community members – like a wave or a smile or just a "hi!"– that reminded him that he had a place in the world. An acknowledgment of belonging, even through a simple gesture, can be enough to make someone who is considering suicide as a way of dealing with the pain of feeling alone reconsider for the moment.

The day then moved through a series of activities. First, the youth interviewed each other about positive aspects of their communities. They were invited to think of a time when something had worked well for them in their community, focusing attention on the strengths of each individual and each community. They were asked to imagine that these

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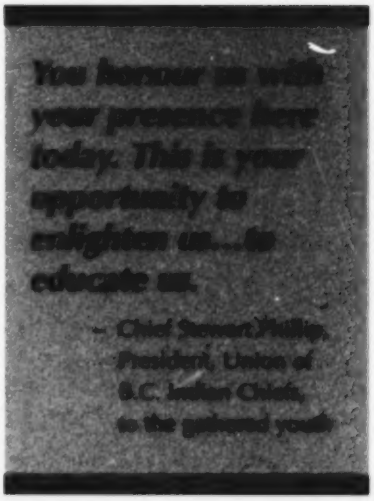

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May 5: The inter-nation forum

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positive things were permanent in their lives and their communities, and to think about what that would look like.

The youth then worked in small groups to share what they had learned in the interviews to create powerful visions of the future, which would provide a direction and guide for people working together to develop safe, healthy and peaceful communities – the kind of places where youth will thrive. They asked a leader or policy-maker to sit with them and listen to their visions of the future.

Finally, the youth were invited to speak to the whole gathering, sharing their ideas and energy in the form of recommendations about how their communities can move forward together. With tremendous enthusiasm and excitement, they invited and challenged the adults in the room to support them – whenever they work with youth – by providing them with opportunities to tell their stories, to be listened to, and to engage with adults in taking action. They made some suggestions about what that support would look like:

- support for the emergence of a youth voice and identity, through the creation of forums and other processes where youth can tell their stories and the provision of support groups and counsellors in communities so youth can speak out about youth suicide issues;
- opportunities for youth to be heard in their communities, whether on reserves or in urban areas; adults actively listening to youth when they explain how issues and actions in their communities affect them; and opportunities for youth to speak to community leaders and decision-makers, so that their voices can play a meaningful part in their community's decision-making processes; and
- movement from speaking and listening to acting together, with adults, Elders, leaders and policy-makers opening their minds and hearts in order to see the valuable role that youth can play in building a healthy future, and working with youth in a peaceful and mutually respectful environment.

Specifically, the youth asked for:

- opportunities for more involvement in cultural activities
- opportunities to work with Elders and supportive adults; positive liaison with authorities, especially police; and involvement of parents in youth activities
- economic opportunities, including volunteer work opportunities and work experience programs
- more recreational facilities and educational supports
- drug- and alcohol-free communities
- sexual abuse prevention and counselling programs
- development and acceptance of youth leadership, and recognition that youth also have wisdom
- youth-specific budgets and sustained funding.

Through their comments and recommendations, the youth led the other inter-nation forum participants to the understanding that youth suicide and community healing can only be addressed by working together to find solutions, with the support of the larger Canadian community, whether local, provincial, federal or Aboriginal. The whole community – parents, youth, Elders, teachers and others – must arrive together through a process of mutual respect.

By the end of the inter-nation forum, it seemed that a shift had taken place – from the overwhelming sense of loss, alienation and fear people had felt in the face of youth suicide, to youth beginning to take the lead in finding a solution. The energy and the power of youth were palpable, as were the willingness among the others present to hear and accept their views, the mutual respect, and the support for the emergence of youth voices and youth leadership.

A traditional dinner closed the inter-nation forum, with powerful performances by Tsimshian and Nisga'a dancers of all ages.

A community health director from an isolated community expressed surprise and pride in the shy young people from his community for having the courage to get up and address the gathering about what they saw as important changes needed in the community. He said he could see leadership emerging – like "butterflies coming out of their cocoons."

At the end of the forum, with the encouragement of a draw for an iPod, youth participants were asked to fill out evaluation forms (an estimated 98 per cent of youth participants responded). Almost all of the feedback was positive. Some would have liked the forum lengthened to two days. Many requested more opportunities for youth to assemble and have their voices heard. The forms included a section inviting youth who wanted to talk to someone or who felt the need for support to add their name and contact information; a number of youth did this and counsellors followed up with them within a week.

Youth Voices at the Inter-Nation Forum

A good understanding of who you are and where you come from is a very important part of your cultural identity — your tribe, your house, your community, your nation.

We have a voice and we're learning how to use it.

We need to catch up on the culture because the more technology that comes into the world, the kids aren't paying attention to the culture, and we're losing it.

We are all trying to find our talents and the place we belong in our communities.

The community is there to help the youth. To belong to a community you need to be involved. We need to strengthen the relationship between Elders, adults and youth so that there is mutual respect.

It is good to have a positive attitude toward the future of our communities.

Elders have wisdom; but don't forget we have wisdom too.

We need to remember that we are not alone.

Moving from "I" to "we"

At the policy round table, the facilitator summarized the activities of the inter-nation forum in terms of a process that moved through three distinct stages, which he described as the emergence of youth leadership:

- the "I" process, in which the youth focused on themselves and their experiences
- the "I–You" process, in which the youth spoke directly to a leader or policy-maker
- the "We" process, where the youth encouraged everyone to work together.

The facilitator also applied these categories to the recommendations provided by the youth:

- support the "I" by providing opportunities for youth to tell their stories to each other and to adults
- support the "I–You" by actively listening to youth
- support the "We" by acting together, working as one with youth.

We, it is everything about we. We all have respect then we are treated with respect. We are raised to do this. Not just to our Elders, but to all people in the communities. It brings our communities together.

– Haida youth

[The youth] invited us to become bigger. They invited us to do things differently, to truly engage and work with them to achieve community transformations....They said that the answer to these questions about suicide and community healing is WE. Using the word 'WE' has major implications, because it suggests a place that we need to arrive at together, a place where youth come to take some responsibility for the changes in their communities.

– Chris Corrigan, facilitator

May 6: The policy round table

The policy round table brought together policy-makers from federal, provincial, municipal and First Nations governments, as well as youth, Elders, band representatives, police and community activists. The intention was to discuss what they had heard from the youth and to make decisions about and commitments to supporting them.

The day began with a report on the inter-nation forum by the facilitator. Round table participants were then invited to share their thoughts on what the youth had said.

The Aboriginal leaders' pride in their youth was clearly evident, as was their urgent desire to work with the Aboriginal and non-Aboriginal communities to meet the needs of youth. The desire of government policy-makers and administrators to work with Aboriginal communities to help was also evident. Everyone had listened to, heard and understood what the youth had to say. What was left to do was to follow their lead and look for opportunities to work together to "grow the good" in communities.

Highlights of the morning's discussion included the following:

- Youth called for unity among the nations to help address divisions resulting from the historic and current pressures exerted by non-Aboriginal society on Aboriginal communities.
- Some Elders and hereditary chiefs referred to traditional law and values, including respect for youth. One speaker observed that youth were actually calling for the strengthening of traditional law, noting that the role of youth in communities and traditional governance and social systems had declined.
- Several adults commented on the desire of youth to be more involved in cultural life and traditional teaching.

It was agreed that:

- Programming, funding and policy must better reflect the needs of youth in specific communities. This will require a concerted effort by various jurisdictions and agencies to spend funds in effective ways.
- The search for long-term solutions must not be deflected by quick fixes. At the same time, however, youth are calling for meaningful action *now*, and immediate responses, ideas and solutions are also needed.
- Youth need to be involved in and contribute more to planning and programming that affects them.

There was a strong feeling in the room that the day should not end without some clear, concrete action being taken to ensure that the momentum from the inter-nation forum continued after the event. An opportunity presented itself when the Haida youth proposed another inter-nation gathering in the summer to carry on the work of

Sayt K'üülm Goot. This proposal received an initial commitment of support, including funds from the *Sayt K'üülm Goot* project.

In the afternoon, the round table participants broke into small groups to discuss actions that might follow from the gathering. These ideas were reported back, discussed and refined into short-term and longer-term ideas.

Short-term ideas included:

- development of a presentation for the next First Nations Summit meeting
- development of a report for the next Assembly of First Nations meeting
- immediate implementation of RCMP commitments (to work in a positive atmosphere with youth, to include two and a half days of full immersion training in communities, and to provide monthly reports to chiefs and councils)
- development of youth councils in communities, supported by leadership
- the Ministry of Human Resources working with Friendship House to look at employment issues.

Medium- and long-term ideas included:

- implementation of a comprehensive prevention intervention program – to be pursued by First Nations Health directors with government partners and stakeholders
- provision of budgets for youth to spend in their communities
- a gathering in Prince Rupert in a year to review progress made on the commitments
- convening of a meeting of federal, provincial and First Nations leaders to discuss how funding formulas can better reflect the needs of youth in communities; this would focus on sharing and collaboration between organizations and the targeting of funds for youth needs at the community level, especially for cultural and recreational needs and the needs of children and youth in care.

At the conclusion of the policy round table, there was a brief ceremony in which a number of community organizations and the Ministry of Children and Family Development signed the Prince Rupert youth suicide intervention protocol.

Participants in the inter-nation forum and policy round table then began to return to their various communities, feeling positive and energized, ready to address the issue of youth suicide and carrying forward the momentum created by the remarkable events of these three days.

Afterwards: Collateral successes

Many things have happened since the events of May 4, 5 and 6, 2005. One health director has called them "collateral successes." Some are a direct result of commitments made at the policy round table; others have been reported to us as having been built on or enhanced by relationships developed during the events.

Policy round table follow-up

Initiatives resulting from commitments made at the policy round table include:

- The Ministry of Employment and Income Assistance has requested a meeting with Prince Rupert Friendship House to discuss youth employment and educational opportunities.
- An elected youth council has been established in Kitkatla, and a band councillor who attended the inter-nation forum has become a champion for youth at band council meetings.
- 300 youth from the Haida, Tsimshian and Nisga'a Nations, and their chaperones, gathered at Haida Gwaii in August 2005, to meet each other, celebrate their traditions, and learn about their culture. They have expressed a desire to have such a gathering once a year.
- The First Nations Summit has continued to develop its provincial youth suicide prevention strategy.
- An inter-ministry meeting has been held on Aboriginal mental health, addictions and youth suicide. Additional meetings are planned in order to develop a collaborative cross-ministry plan.
- The First Nations and Inuit Health Branch is receiving money over the next few years for suicide prevention. The Child and Youth Officer and the First Nations Summit have been invited to partner with the branch to facilitate a youth participation and community engagement process.
- The Nisga'a Lisim government is providing funds for the development of seven youth councils, one in each of the four Nass Valley communities and for three urban locations. One representative from each of the youth councils will sit in the Nisga'a Lisim government and represent youth from their communities.
- The Nass Valley has been selected by the federal government as one of two Canadian sites for an Integrated Hub Model project, aimed at making social services more available and accessible to people living in rural, remote and northern communities. The Nisga'a Lisim government will use the project to develop youth capacity and wellness.

Relationship-building and listening to youth

Initiatives reported to us as having built on or been enhanced by relationships developed during the inter-nation forum or policy round table include:

- A program for youth at risk is being initiated in Prince Rupert through a contractual arrangement between the Ministry of Children and Family Development and Friendship House. The program will have four key components: an outreach counsellor, life skills training, advocacy and cultural activities.
- Lax Kw'alaams is working with the Musqueam Band in the Lower Mainland to engage young women in addressing self-esteem issues. A youth council has also been established in Lax Kw'alaams.
- The Northern Health Authority reports that it has begun to design mental health and addictions programs in a way that will integrate more traditional and culturally relevant approaches and provide opportunities for youth, Elders and communities to participate in service design and community planning processes.
- Metlakatla reports a desire to establish closer working relationships with the Prince Rupert school district, where their youth attend school.
- A youth conference, with a component on Aboriginal youth suicide, is going to be held in Kitkatla, in partnership with the RCMP.

Other ongoing initiatives

There are a number of ongoing initiatives that are not necessarily related to the events that took place in Prince Rupert in May 2005, but which the participants in the events wanted reported. These are:

- The Loomsk project continues in Prince Rupert. Based on the Zuni Life Skills curriculum, the program has been modified to reflect Northwest Coast First Nations culture and traditions. Loomsk means respect in the Sm'algyax language of the Tsimshian people. The program is currently used in Grades 6 and 7; the school district plans to expand it into other grades.
- Through the White Stone Project, organized by the Prince Rupert Urban Aboriginal Restorative Justice Program, youth leaders in some of the communities have received eight days of training on life skills development, which incorporated self-esteem, problem-solving, goal-setting, communication and coping skills. After receiving the training, youth leaders returned to their communities to present community youth education sessions.
- Two Aboriginal child and youth mental health outreach clinicians and one Aboriginal mental health support worker position have been created under the North Region child and youth mental health plan. One position is on Haida Gwaii; one is in Prince Rupert, servicing the outlying villages; and one is in the Terrace area.
- Expansion of suicide prevention initiatives will be addressed in the North Region Aboriginal child and youth mental health plan. The possibility of using models in addition to the Loomsk and Whitestone projects is being explored.
- The Ministry of Children and Family Development is engaging with various First Nations representatives in exploring ways to make its hiring process more culturally friendly.
- The Aboriginal child and youth mental health planning process, led by the Northern Aboriginal Authority for Families is continuing. Consultations with Aboriginal communities and stakeholders began in November 2005 and will be used to develop the plan.
- Federal, provincial and First Nations leaders met in the fall of 2005 about crisis response for Aboriginal communities. A further meeting of Indian and Northern Affairs Canada, Health Canada, the Ministry of Children and Family Development, the Ministry of Health and the RCMP is planned to begin the process of formalizing contributions from each sector, with results of the meeting to be brought back to First Nations leaders.

REFLECTIONS AND ADVICE

We know there is a problem. We know the statistics on Aboriginal youth suicide. We know that Aboriginal youth have greater risk factors for suicide than the general population.

We know what makes a difference for children. Whether you use the Circle of Courage model, or resilience research and theory, or the rights-based approach of the UN Convention on the Rights of the Child, the underlying principles are the same: a sense of belonging, opportunities to participate, and strong connections with caring adults – all of which exist in community. And we know that youth and communities need to be involved in the solutions to serious social problems that affect them.

We also know some specific strategies for reducing Aboriginal youth suicide – and we know that a single strategy won't work. We need to reduce the risk factors for suicide by planning programs that address these factors directly. We need to be strategic in implementing approaches that promote the protective factors that have the potential to reduce suicide risk and are known to promote the individual capacities of *all* youth. We need to work with the young people within their social circumstances – which means supporting families, schools and communities to strengthen youth resilience, culture and identity.

We know that Canada's constitutional division of powers is not going to change, and that differences in First Nations and federal and provincial governments' perspectives on jurisdictional issues are unlikely to be resolved soon. We need to ensure that neither of these realities create insurmountable obstacles to progress on the prevention of Aboriginal youth suicide and the promotion of healthy communities and youth. Bureaucratic barriers can be brought down through a concerted effort to go outside bureaucratic boundaries and develop relationships and alliances with those in other bureaucracies, and, just as important, to engage with communities and youth.

Finally, we know that the answers lie in communities, and that youth who are engaged are not only likely to increase their own strength in meeting the challenges of life, but also will bring common-sense perspectives to the table. Whatever government the funds come from, or

whatever government department is responsible for programs, both funds and programs must be directed at supporting communities and youth in becoming part of the solution. Instead of protecting jurisdiction, it's clear that the goal for all involved should be to provide a net of support for communities and youth across all jurisdictional boundaries.

Acting on what we know

We know all these things. Why can't we just get on with it and implement the solutions we know can work?

Sayt K'üülm Goot was about acting on what we know: it engaged both youth and communities in finding solutions to a problem that affects them. We engaged youth and their communities in planning for the event. We created an environment where youth could lead the process, where magic could and did happen, and where insights and ideas could be expressed and heard. We listened to what youth had to say to their communities and to the policy-makers and leaders from outside their communities. And the communities, the policy-makers and the leaders acted on those ideas.

Did it work? There is no doubt that there were aspects of the planning process and of the event itself that weren't perfect; there certainly were chaotic moments, because no one was completely "in control." But I think everyone went away from the events of May 4, 5 and 6 at least a little changed – whether by something they heard or saw, or by new relationships and alliances they had formed.

If we had achieved nothing more than to provide young people, community leaders and policy-makers with an opportunity to use their imaginations, leaving them with a vision of the real possibility of change, upon which they can act individually, I would feel the event had been worthwhile. But based on the list of "collateral successes," I believe we achieved much more.

I have set out some advice below to the provincial government, which if followed will also make a difference. To the band and community leaders in Prince Rupert and surrounding communities, I ask you also to act, in whatever way you can, on the advice given by the youth who participated in the inter-nation forum.

Through small and not-so-small steps like these, we will keep the momentum going, so that we can act together, with one heart: *Sayt k'üülm goot*.

Advice to the provincial government

This list of recommendations is not a long one. It is not intended to cover everything that the provincial government can do to prevent Aboriginal youth suicide. For example, it assumes the importance of developing best practices and evidence-based medical and mental health programs and services, as well as the advice in *Acting on What We Know* and other reports. The focus of this advice is on involving youth and communities in the solutions and addressing the longstanding jurisdictional and funding barriers to progress.

1. Honour the youth who participated in the inter-nation forum in Prince Rupert on May 5, 2005 by acting on their recommendations and taking them into account in planning, policy and funding decisions within all relevant ministries and at whatever level is appropriate. When a funding or policy decision reflects the youth's recommendations, acknowledge their participation in decision-making.

2. In the ministries of Health and Children and Family Development, focus energy and resources on supporting communities in developing local strategies to prevent Aboriginal youth suicide, including sharing of ideas by Aboriginal communities that are not experiencing youth suicide.

3. Engage, in a meaningful way, Aboriginal communities and youth in the Ministry of Children and Family Development planning process for the provincial child and youth mental health plan, and incorporate in community plans a holistic approach to the delivery of services.

4. Expect provincially-funded mental health service providers, as part of their job, to develop community-based alliances with mental health workers funded by federal departments, and make community and youth engagement key principles in the work done through these alliances.

5. Ensure that Aboriginal youth are fully involved in all discussions about suicide prevention policies and programs, and that all programs developed include training, development, compensation and leadership roles for youth.

6. In planning, policy, funding and practice decisions related to preventing Aboriginal youth suicide and promoting healthy youth and communities, recognize the uniqueness of Aboriginal communities, the diversity of their needs, the significance of

At the inter-nation forum on May 5, 2006, youth said they want:

- opportunities for more involvement in cultural activities
- opportunities to work with Elders and supportive adults; positive liaison with authorities, especially police; and involvement of parents in youth activities
- economic opportunities, including volunteer work opportunities and work experience programs
- more recreational facilities and educational supports
- drug- and alcohol-free communities
- sexual abuse prevention and counselling programs
- development and acceptance of youth leadership, and recognition that youth also have wisdom
- youth-specific budgets and sustained funding.

their gatherings and cultural activities, and the importance for youth of relationships with adults and connecting with traditional values.

7 Take leadership at the premier's level, as well as at the level of the ministers of Health and Children and Family Development, in developing and implementing a strategy to break down the barriers created by jurisdictional issues. In particular, pressure the federal government for more flexible funding to support Aboriginal child and family service agencies so that they can fully participate in community-based youth suicide and mental health promotion strategies.

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Appendix: Contributors

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First Nations and Inuit Health Branch, Department of Health Canada

First Nations Summit

Kitkatla Band

Ministry of Children and Family Development

Ministry of Community, Aboriginal and Women's Services

Ministry of Health

Ocean Fisheries Ltd.

Ridley Terminals Inc.

T.P. Log Salvage Ltd.

Tsimshian Tribal Council

Door prizes

Bare Essentials

Coast Prince Rupert Hotel

First Nations and Inuit Health Branch, Department of Health Canada

Northern Drugs

Prince Rupert Urban Aboriginal Restorative Justice Program

Salty Crab

Tracey J. Michell

Tricorp

Triumph Timber

Tsimshian Tribal Council

Ware Haus

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